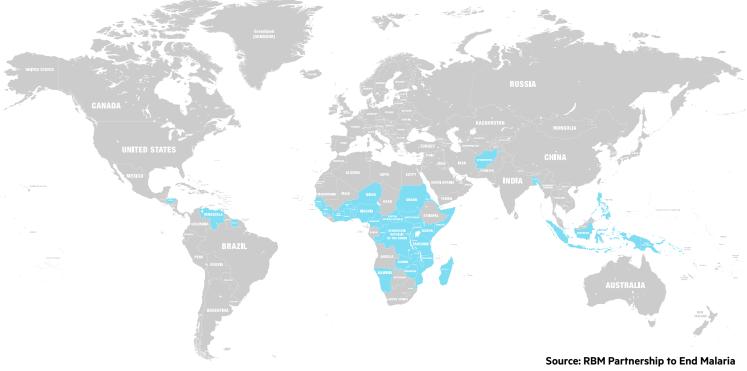


Progress report of the RBM Country and Regional Support Partner Committee

Support Provided for Global Funding Request for 2021-2023:

During the reporting period, the CRSPC focused on ensuring that countries submit high-quality applications to the Global Fund, supporting countries in updating their national strategic plans, and responding to the impacts of the unfolding COVID-19 pandemic on malaria programmes.

During the first half of the year the CRSPC supported 46 eligible countries (countries that plan to submit their funding requests in 2020) in their Global Fund malaria funding request development process. This includes consultant support (international and local), local meeting support for country dialogue, country peer review through mock TRPs, expert review of the proposals, finalising background documents such as national strategic plans and program reviews.

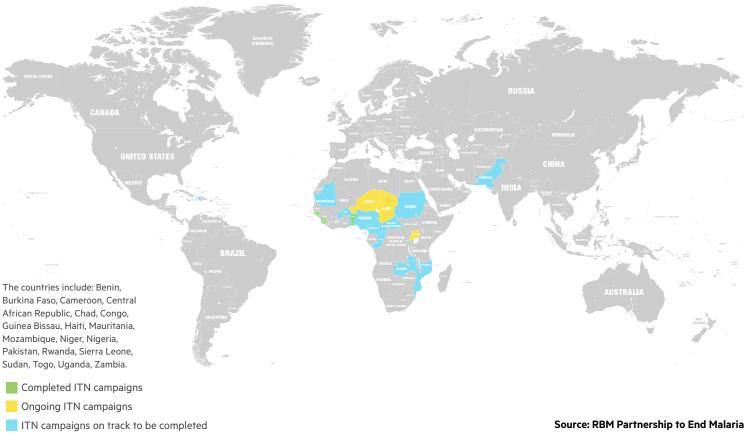


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- The first country peer review mock Technical Review Panel (TRP) workshop was held in Nairobi Kenya from the 11-13 February 2020 for the countries that submitted their Global Fund application during the first window. A total of 21 countries and territories attended the workshop including Afghanistan, Bangladesh, Benin, Burundi, Central African Republic, Republic of Congo, Djibouti, Democratic Republic of the Congo, Guinea, Guinea- Bissau, Indonesia, Malawi, Mozambique, Namibia, Nigeria, Philippines, Rwanda, Solomon Islands, Uganda, Zimbabwe and Zanzibar.
- For the countries that submitted in the second window, virtual mock TRPs were conducted for 20 countries including Burkina Faso, Cabo Verde, Cameroon, Central African Republic, Côte d'Ivoire, Eritrea, Eswatini, Ghana, Mozambique, Niger, Papua New Guinea, Rwanda, Senegal, Solomon Islands, Somalia, South Sudan, Sao Tome and Principe, Sudan, United Republic of United Republic of Tanzania, Togo and Zambia. Weak internet connectivity in some countries is a key bottleneck hampering discussions.
- In the first half of the year international consultant support has been provided to 34 countries including Afghanistan, Benin, Burkina Faso, Burundi, Cabo Verde, Cameroon, Central African Republic (CAR), Cote D'Ivoire, Congo, Djibouti, Democratic Republic of Congo (DRC), Eswatini, Gambia, Ghana, Guinea, Guinea Bissau, Kenya, Malawi, Mozambique, Namibia, Niger, Nigeria, Rwanda, Senegal Somalia, South Sudan, Sao Tome and Principe (STP), Sudan, Suriname, Tanzania, Timor Leste, Togo, Uganda, Zambia, Zanzibar. For the first quarter, this support was in person, whilst in the second quarter, with the onset of the COVID-19 pandemic, this support was remote.
- Out of all the 34 countries that submitted just three have been sent back for iteration and these countries are being supported through CRSPC. CRSPC is also providing support to the countries in the grant making process.

Support provided to resolve implementation bottlenecks.

Support was provided to countries in resolving the bottlenecks that affect the malaria interventions. This includes ITNs distribution campaign planning and re-planning in the context of COVID-19.



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More requests were received from the countries for Technical Assistance than were originally planned for the period due to the need to re-plan Insecticide Treated Nets (ITN) campaigns in the context of the current COVID-19 pandemic. More are expected in the coming months as many countries still need to adapt their campaign plans in the context of COVID-19 pandemic.

How is CRSPC supporting countries in sustaining their malaria control programme activities during the COVID-19 pandemic?



Regular conference calls are organised with all malaria endemic countries in Africa to follow up on their status including:

- identification of bottlenecks, commodity availability and work to address them
- support to modified campaigns such as:
 ITNs
 - Seasonal Malaria Chemoprevention (SMC)
 - Indoor Residual Spraying (IRS)



The RBM Partnership developed a weekly CRSPC tracker which tracks:

- campaign status
- stock outs
- technical assistance
- other bottlenecks.



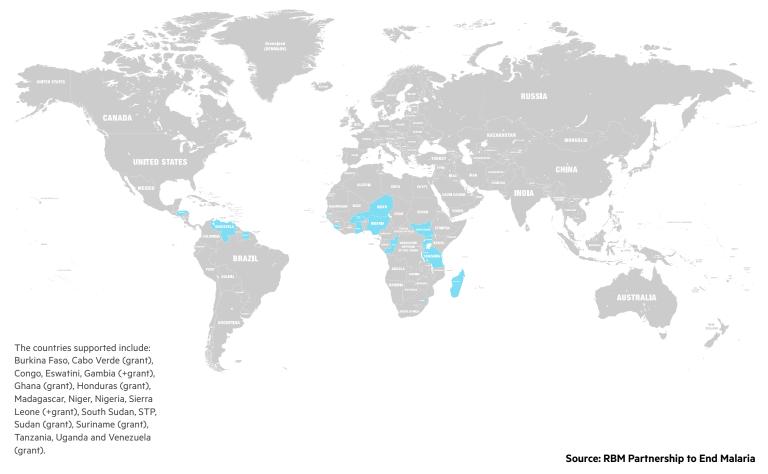
The data are shared weekly through the RBM partnership website. This support has contributed to addressing stock outs and facilitating resource mobilization through reprogramming.



Several countries reported stock outs especially during lock down. These stock outs were addressed through splitting of orders in some cases and air lifting supplies in others. Several countries have reported reduced access to health facilities during lock down, though the majority report significant improvements as PPE becomes more readily available and local transport restrictions are lifted.

As the COVID-19 pandemic impacted the world in 2020, WHO modelling showed that under the worst-case scenario, in which all ITN campaigns due in 2020 are suspended and with a 75% reduction in access to effective antimalarial medicines, there could be doubling in malaria deaths in Africa, representing a reversal in the substantial progress in malaria mortality reductions seen over the last 2 decades. At the beginning of 2020, plans were in place for over 200 million LLINs to be distributed, and for more children than ever before projected to receive SMC, and there were valid concerns that these campaigns would be seriously disrupted. The good news is that almost across the board, SMC, IRS and LLIN campaigns planned for 2020 are on track to be completed before the end of the year. Countries, with support from their partners, have reprogrammed, replanned, secured additional resources, and have shown strong leadership to ensure that their campaigns took place as planned, and have worked to sustain case management.

Malaria Programme Reviews (MPR) and Malaria National Strategic Plan (NSP).



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The MPR and the NSP enabled countries to align malaria plans with the broader health and development agenda, to review the status of the implementation of their strategies, align their policies, and becomes an input to the preparation of the Global Fund proposal development.



In the first half of 2020, RBM/CRSPC, under the leadership and at the request of WHO, has provided support to countries through international or local consultants in malaria mid-term/programme reviews and in developing national malaria strategic plans.